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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

98720

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	Serial							
D	ATE RECEIVED							
1	ł							

Name of Offering (☐ check if thi Private Placement of Common Stock as		me has changed, and indicate change.)								
Filing Under (Check box(es) that apply			JULOE	PRO	CESSED					
Type of Filing: New Filing	★ Amendment	.,	116	/ MAY	<u> </u>					
	A	A. BASIC IDENTIFICATION DATA	///							
1. Enter the information requested about	ut the issuer		14,	TH	OMSUN					
Name of Issuer (☐ check if thi Toreador Resources Corporation	s is an amendment and na	me has changed, and indicate change.)	1 /	1	IANC!AL					
Address of Executive Offices 4809 Cole Ave., Suite 108, Dallas,										
Address of Principal Business Operatio (if different from Executive Offices)	ns (No. and Street, City	y, State, Zip Code) Telephone N	umber (Including Area	Code)						
Brief Description of Business Oil and Gas Acquisition and Developm	ent		- 1-							
Type of Business Organization										
orporation corporation		limited partnership, already formed			other (please specify):					
☐ business trust		limited partnership, to be formed								
Actual or Estimated Date of Incorporation or Organization: Month Year 0 7 5 1										
Jurisdiction of Incorporation or Organ	nization: (Enter two-letter	U.S. Postal Service abbreviation for State:	DE							
	CN for Canada	a; FN for other foreign jurisdiction)								
		-								

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-97)



A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Bell, Alan Business or Residence Address (Number and Street, City, State, Zip Code) 10222 Daria Dr. Dallas, TX 75229 □ Director Check Box(es) that Apply: Promoter ☐ Beneficial Owner □Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Brewer, David M. Business or Residence Address (Number and Street, City, State, Zip Code) 33 Plymouth Road Summit, NJ 07901 □ Director Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Brewer, Herbert L. Business or Residence Address (Number and Street, City, State, Zip Code) 6200 Forest Lane, 2 Cedro Place Dallas, TX 75230 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ■ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Campise, Charles Business or Residence Address (Number and Street, City, State, Zip Code) 4809 Cole Ave., Suite 108 Dallas, TX 75205 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Falb, Peter L. Business or Residence Address (Number and Street, City, State, Zip Code) 15 Broad Street, Suite 406 Boston, MA 02109 Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) FitzGerald, Michael J. Business or Residence Address (Number and Street, City, State, Zip Code) 4809 Cole Ave., Suite 108 Dallas, TX 75205 Check Box(es) that Apply: ☐ Promoter ☐ General and/or □ Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Lee, William I. Business or Residence Address (Number and Street, City, State, Zip Code) 4809 Cole Ave., Suite 107 Dallas, TX 75205 □ Director ☐ Promoter ☐ General and/or Check Box(es) that Apply: □ Beneficial Owner Managing Partner

Full Name (Last name first, if individual)

4809 Cole Ave., Suite 108 Dallas, TX 75205

Business or Residence Address (Number and Street, City, State, Zip Code)

Lovett, Nigel J.B.

					<u></u>
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, McLaughlin, John Mark	if individual)				
Business or Residence Addi 2201 Sherwood Way, Suite		Street, City, State, Zip Code) FX 76901			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Ramirez, Edward	,				
Business or Residence Addi 4809 Cole Ave., Suite 108		Street, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, Rostow, Nicholas	·				
Business or Residence Addr 420 E. 72 nd Street, Apt. 5B		Street, City, State, Zip Code) 0021			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Sanders, H.R. Jr.	if individual)				
Business or Residence Addr 390 County Road 1526 Mo		Street, City, State, Zip Code) 526			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Weir, Douglas W.	if individual)				17
Business or Residence Addr 4809 Cole Ave., Suite 108		Street, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Williamson III, Herbert C.					
Business or Residence Addr Comanchero – 4 Ranch, 690		Street, City, State, Zip Code) int, TX 78024			

						B. IN	FORM	/ATIO	N ABC	UT O	FFERI	NG	 ,	
1.	Has the is	suer sold				to sell,	to non-	accredite	ed invest	ors in th	nis offeri		Yes	No
Answer also in Appendix, Column 2, if filing under ULOE.										\boxtimes				
2. What is the minimum investment that will be accepted from any individual?										\$ <u>845</u>	5,000			
3.	Does the	offering p	permit jo	oint own	ership of	f a single	e unit:						Yes	No ⊠
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Merrill Lynch, Pierce, Fenner & Smith								-						
Full .	Name (La		urst, it ir Vorld Fin			lew Yor	k. NY 1	0080						
Busin	ness or Re								le)					
Nam	e of Assoc	iated Br	oker or I	Dealer									· -	
State	s in Whic	h Person	Listed F	las Solic	ited or I	ntends t	o Solici	t Purcha	sers					
(Che	ck "All St	ates" or	check in	dividual	States).								⊠	All States
[AL	.] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL	[IN]	[IA]	[K\$]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[M]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	(OR)	[PA]		
[RI] [SC]	(SD)	[TN]	[TX]	[UT]	$[V\Upsilon]$	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	Name (La	st name i	first, if ir	ndividua	l)									
Busin	ness or Re	sidence .	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)					,
Nam	e of Assoc	ciated Br	oker or I	Dealer										1
	s in Whic													
-													⊔	All States
[AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
(IL (M)		[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	(ME) [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI		[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)		
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Full	Name (La	st name i	first, if ir	ndividua	1)									
Busin	ness or Re	sidence .	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)					·
Nam	e of Assoc	iated Br	oker or I	Dealer									· ··	
	s in Whic													All States
(AL	.] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
(IL		[lA]	[KS]	[KY]	[LA]	[ME]	[DD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[M]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PI	ROCE	EDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggreg Offering		Aı	mount Already Sold
	Debt	\$ <u> </u>		\$	0
	Equity	\$ <u>53,12</u> 6	0,000	\$_	50,413,326
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$ <u> </u>		\$	0
	Partnership Interests	\$0		\$	0
	Other (Specify)	\$ <u> </u>		\$	0
	Total	\$ <u>53,120</u>	0,000	\$	50,413,326
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."				
		Numb Investo			Aggregate Follar Amount of Purchases
	Accredited Investors	6		\$	0
	Non-accredited Investors	0		\$	0
	Total (for filings under Rule 504 only)	N/A		\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of offering	Type		D	ollar Amount
		Securi	ty	_	Sold
	Rule 505	<u>N/A</u>		\$	N/A
	Regulation A	N/A		<u>\$_</u>	N/A
	Rule 504	N/A		\$	N/A
	Total	N/A		\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the secuthis offering. Exclude amounts relating solely to organization expenses of the issuer. The inform be given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	ation may			
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs	***************		\$	0
	Legal Fees		\boxtimes	\$_	80.000
	Accounting Fees			\$_	0
	Engineering Fees			\$_	0
	Sales Commissions (specify finder's fees separately)	*************		\$_	0
	Other Expenses (Finder's Fees)		П	s_	2,686,692

\$____2,766,692

X

	C. OFFERING PRICE, NU	IMBER OF INVESTORS, EXPEN	ISES AND USE	OF PR	OCEEDS	\$
	b. Enter the difference between the aggregate and total expenses furnished in response to P proceeds to the issuer."	art C-Question 4.a. This difference is the	"adjusted gross			\$ <u>50,353,308</u>
5.	Indicate below the amount of the adjusted greeach of the purposes shown. If the amount for check the box to the left of the estimate. The proceeds to the issuer set forth in response to	r any purpose is not known, furnish an e- total of the payments listed must equal the	stimate and			
		•		O! Dire	ments to fficers, ectors, & filiates	Payments To Others
	Salaries and fees	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installat	ion of machinery and equipment		\$		\$
	Construction or leasing of plant buildir	gs and facilities		\$		\$
	Acquisition of other businesses (includ may be used in exchange for the assets	\$		\$		
	Repayment of indebtedness	\$		\$		
	Working capital			\$	✓	\$ <u>50,353,308</u>
	Other (specify)			\$		\$
	Column Totals			\$	<u> </u>	\$ <u>50,353,308</u>
	Total Payments Listed (column totals a	dded)			\$ <u>50,3</u>	353,308
		D. FEDERAL SIGNATUR	E		<u></u>	
ign	issuer has duly caused this notice to be signed attraction ture constitutes an undertaking by the issuer to mation furnished by the issuer to any non-accr	furnish to the U.S. Securities and Excha	inge Commission,			
	uer (Print or Type) reador Resources Corporation	Signature	Date May	2007		
		Title of Signer (Print or Type)	Way II.	2007		
		Senior Vice President and Chief Financia	al Officer			,
	Intentional misstatements or omi	ATTENTION ssions of fact constitute federal cri	minal violations	. (See	18 U.S.C.	. 1001).
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		E. STATE SIGNATURE		
١.	•	presently subject to any of the disqualification provisions of such	Yes	No 🗵
	See Appendi	ix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes t (17 CFR 239.500) at such times as required	o furnish to any state administrator of any state in which this notice is by state law.	s filed, a notice o	on Form D
3.	The undersigned issuer hereby undertakes t offerees.	o furnish to the state administrators, upon written request, information	n furnished by th	ne issuer to
4.	The undersigned issuer represents that the i Offering Exemption (ULOE) of the state in exemption has the burden of establishing th	ssuer is familiar with the conditions that must be satisfied to be entitle which this notice is filed and understands that the issuer claiming the at these conditions have been satisfied.	ed to the Uniforn availability of t	n Limited his
	e issuer has read this notification and knows t dersigned duly authorized person.	the contents to be true and has duly caused this notice to be signed on	its behalf by the	:
	uer (Print or Type) reador Resources Corporation	Signature Date May 22007		
	me of Signer (Print or Type)	Title of Signer (Print or Type)	.	
Dο	uglas W. Weir	Senior Vice President and Chief Financial Officer		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3		4				5	
,	Intend to non-acconnections investors (Par	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Type	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ							<u> </u>			
AR										
CA		х	Common Stock and Warrants	1	\$17,706,663	0	0		X	
со										
СТ										
DE									,	
DC										
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NH									
NJ		1		-					
NM	 - 								
NY		Х	Common Stock and Warrants	4	\$22,706,663	0	0		х
NC		Α	uiu Warung		\$22,100,003		- *		
ND					 .				
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VT				<u> </u>	<u> </u>		 		
VA	\vdash						 		
WA	 			<u> </u>		<u> </u>	 		
WV_	 								
WI	 	<u>X</u> _	Common Stock	1	\$10,000,000	0	0_		Х
WY	<u> </u>		L		<u> </u>	<u> </u>		L	

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